

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

SECTION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
CLAS. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected
☒ Allowed
☒ (Through numeral) Canceled
☒ Restricted
☐ Non-elected
☐ Interference
☐ Appeal
☐ Objected

Claim	Date	Claim	Date	Claim	Date
1	1/10/61	51		101	
2	1/10/61	52		102	
3	1/10/61	53		103	
4	1/10/61	54		104	
5	1/10/61	55		105	
6	1/10/61	56		106	
7	1/10/61	57		107	
8	1/10/61	58		108	
9	1/10/61	59		109	
10	1/10/61	60		110	
11	1/10/61	61		111	
12	1/10/61	62		112	
13	1/10/61	63		113	
14	1/10/61	64		114	
15	1/10/61	65		115	
16	1/10/61	66		116	
17	1/10/61	67		117	
18	1/10/61	68		118	
19	1/10/61	69		119	
20	1/10/61	70		120	
21	1/10/61	71		121	
22	1/10/61	72		122	
23	1/10/61	73		123	
24	1/10/61	74		124	
25	1/10/61	75		125	
26	1/10/61	76		126	
27	1/10/61	77		127	
28	1/10/61	78		128	
29	1/10/61	79		129	
30	1/10/61	80		130	
31	1/10/61	81		131	
32	1/10/61	82		132	
33	1/10/61	83		133	
34	1/10/61	84		134	
35	1/10/61	85		135	
36	1/10/61	86		136	
37	1/10/61	87		137	
38	1/10/61	88		138	
39	1/10/61	89		139	
40	1/10/61	90		140	
41	1/10/61	91		141	
42	1/10/61	92		142	
43	1/10/61	93		143	
44	1/10/61	94		144	
45	1/10/61	95		145	
46	1/10/61	96		146	
47	1/10/61	97		147	
48	1/10/61	98		148	
49	1/10/61	99		149	
50	1/10/61	100		150	

If more than 150 claims or 10 actions
staple additional sheet here

LEFT MARGIN